

## **Progressive Treatment Program Guidelines for Riverview and Dorothea Dix Psychiatric Centers**

Public Law 2005, ch. 519, Part BBBB creates a Progressive Treatment Program in Maine. Program criteria are codified at 34-B M.R.S.A. § 3873. The Public Law limits initial availability of the program to persons previously hospitalized at either of the state's two public psychiatric hospitals, Riverview Psychiatric Center or Dorothea Dix Psychiatric Center. Each of those hospitals is associated with an assertive community treatment team that will provide community-based care for patients who have been ordered by the District Court to participate in the Progressive Treatment Program. This document describes the criteria and processes to be followed in operating the program. As use over time dictates, these guidelines may be revised as necessary.

### **A. Definitions**

In the context of the Progressive Treatment Program, the following words and phrases have the following meanings.

**Assertive Community Treatment** (“ACT”) means a self-contained service with fixed point of responsibility for providing treatment, rehabilitation and support services to persons with mental illness for whom other community-based treatment approaches have been unsuccessful. Assertive community treatment uses clinical and rehabilitative staff to address symptom stability; relapse prevention; maintenance of safe, affordable housing in normative settings that promote well-being; establishment of natural support networks to combat isolation and withdrawal; the minimizing of involvement with the criminal justice system; individual recovery education; and services to enable the person to function at a work site. Assertive community treatment is provided by multidisciplinary teams who are on duty 24 hours per day, 7 days per week; teams must include a psychiatrist, registered nurse, certified rehabilitation counselor or certified employment specialist, a peer recovery specialist and a substance abuse counselor and may include an occupational therapist, community-based mental health rehabilitation technician, psychologist, licensed clinical social worker or licensed clinical professional counselor. (See 34-B M.R.S.A. § 3801(11).)

**Disability or Functional Impairment** means a disability or functional impairment that results from a diagnosed Qualifying Mental Illness, and includes the inability to manage one's own finances, inability to perform activities of daily living, inability to behave in ways that do not bring the attention of law enforcement for dangerous acts or for acts that manifest the person's inability to protect from harm. (See 34-B M.R.S.A. § 3801(8-A).)

**Inability to Make an Informed Decision** means inability to make a responsible decision about accepting or refusing a recommended treatment as a result of a lack of mental capacity to understand sufficiently the benefits and risks of the treatment after a thorough and informative

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explanation has been given by a qualified mental health professional. (See 34-B M.R.S.A. § 3801(10).)

**Likelihood of Serious Harm** means, in view of the person's treatment history, current behavior and Inability to Make an Informed Decision, a reasonable likelihood that deterioration of the person's mental health will occur  
AND

that the person will in the foreseeable future pose:

- (1) A substantial risk of physical harm to the person as manifested by evidence of recent threats of, or attempts at, suicide or serious bodily harm;
- (2) A substantial risk of physical harm to other persons as manifested by recent evidence of homicidal or other violent behavior or recent evidence that others are placed in reasonable fear of violent behavior and serious physical harm to themselves; or
- (3) A substantial risk of severe physical or mental impairment or injury to the person as manifested by recent evidence of actions or behavior that demonstrates the person's inability to avoid or protect the person from such impairment or injury. (See 34-B M.R.S.A. § 3801(4)(D).)

**Progressive Treatment Program (PTP)** means a program of court-ordered services provided in an outpatient setting by a specialized Assertive Community Treatment team for a term of six months. (See 34-B M.R.S.A. § 3873.)

**Qualifying Mental Illness** means schizophrenia, schizoaffective disorder, other psychotic disorder, major depressive disorder, bipolar disorder, or other combination of mental disorders sufficiently disabling to meet the criteria of functional disability. (See 34-B M.R.S.A. § 3801(8-A).)

**Severe and Persistent Mental Illness** means a Qualifying Mental Illness plus a Disability or Functional Impairment that has persisted (continuously or intermittently) or that is expected to persist for at least one year as a result of the Qualifying Mental Illness. (See 34-B M.R.S.A. § 3801(8-A).)

## **B. Eligible recipients**

To be eligible for District Court commitment to the PTP, a person must:

- (1) Be 21 years of age or older;
- (2) Have been clinically determined to be suffering from a Severe and Persistent Mental Illness;
- (3) Have been under an order of involuntary commitment to Dorothea Dix Psychiatric Center or Riverview Psychiatric Center at the time of filing of the application for PTP; and

(4) Have been clinically determined to be in need of the PTP in order to prevent interruptions in treatment, relapse and deterioration of mental health and to enable the person to survive safely in a community setting in the reasonably foreseeable future without posing a likelihood of serious harm. This determination must be based on current behavior, treatment history, documented history of positive responses to treatment while hospitalized, relapse and deterioration of mental health after discharge and Inability to Make Informed Decisions regarding treatment.

5) Be able to live within a 25 mile radius of the referring state public psychiatric hospital without undue disruption of the person's natural support system, as negotiated with the person or their representative, for the duration of the PTP.

### **C. Procedure for Referral to the Progressive Treatment Program**

(1) The treating psychiatrist at the state mental health institute, in consultation with the hospital treatment team will

- determine that the person for whom PTP may be proposed is 21 years of age or older;
- determine that the person for whom PTP may be proposed suffers from a Severe and Persistent Mental Illness; and
- at least 30 days prior to expiration of the current involuntary commitment order, assess the person for appropriateness for the PTP.
  - The assessment must be based on current behavior, treatment history, documented history of positive responses to treatment while hospitalized, relapse and deterioration of mental health after discharge and Inability to Make Informed Decision
  - The assessment must determine whether the person is in need of the PTP in order to prevent interruptions in treatment, relapse and deterioration of mental health and to enable the person to survive safely in a community setting in the reasonably foreseeable future without posing a Likelihood of Serious Harm.

(2) If the person is determined to meet all the requirements for court-ordered participation in a PTP, then the hospital will submit the following documents to District Court, along with any other documents that the court may require:

- Application to District Court for an Order of Admission to the Progressive Treatment Program (Form MH 108-PTP)
- Application for Emergency Involuntary Hospitalization to a Mental Hospital (Form MH-100)('blue paper')
- 24 hour certificate
- certification by the Chief Administrative Officer that the patient has been given a copy of the court application and documents attached to that application
- copy of notice and instructions given to the patient

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(3) The hospital treatment team will make a written referral to the ACT team responsible for providing outpatient PTP services and will request consultation in developing the outpatient treatment plan for submission to District Court. As with all treatment planning, the person will be involved, and their advanced directive, if available, will be considered as part of the planning for community tenure. This will happen as soon as possible.

**D. Application for District Court Order for Admission to PTP**

(1) The superintendent will file an application for an order of admission to the PTP with the District Court, using form MH-108-PTP.

(2) The usual procedures and timing for events leading up to the hearing will apply (see 34-B M.R.S.A. § 3864), including filing and production of all required documentation and notices, appointment of counsel and examiners, and timing of the hearing and decision.

**E. Court Procedure**

(1) The usual court hearing procedures will apply. (see 34-B M.R.S.A. § 3864)

(2) The outside examiners and judge will use the standard for Likelihood of Serious Harm defined above to determine whether the patient meets criteria for court-ordered admission to the PTP.

(3) The District Court's order of admission to the PTP will include the following:

(a) A finding that the person meets the first four criteria outlined above under paragraph B, above (Eligible Recipients);

(b) A finding that an ACT team is available to provide treatment and care for the person;

(c) A finding that the person has been clinically determined to be in need of the PTP in order to prevent interruptions in treatment, relapse and deterioration of mental health and to enable the person to survive safely in the community setting in the reasonably foreseeable future without posing a Likelihood of Serious Harm.

(d) A requirement that the person must return to the state mental health institute in the event of failure to participate fully in the PTP and deterioration of the person's mental health so that hospitalization is in the person's best interest and the person poses a Likelihood of Serious Harm. (See 34-B M.R.S.A. § 3864(5).)

(e) An order that participation in the PTP be for a term of six months.

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**F. Duration of Participation in the Progressive Treatment Program**

Participation in the PTP (but not necessarily the ACT team) ends:

1. At the end of the six-month court-ordered term.
2. If, during the six-month term, the person has fully participated in the program and followed the individualized treatment plan, and the ACT team psychiatrist or psychologist certifies that the person is not longer in need of the services of the program.
3. If the person is re-hospitalized involuntarily by court order after district court hearing.

If the person is re-hospitalized on a voluntary basis during the PTP term, program participation is not terminated but instead is temporarily suspended and recommences upon discharge from the hospital.

If the person is re-hospitalized on an emergency involuntary basis during the PTP term (i.e. person's legal status is either on "blue papers" or being held pending court hearing), the PTP continues to run while the patient is in the hospital until either: 1) the patient converts to voluntary status - in which case the PTP is suspended, to be resumed upon discharge, or 2) the person is involuntarily committed by court order following a hearing - in which case the PTP ends. If the person does not convert to voluntary status and is discharged back to the Progressive Treatment Program before the district court hearing, the PTP continues to run throughout the hospitalization.

**G. Involuntary Re-Hospitalization from the Progressive Treatment Program**

(1) Upon application of the ACT team physician or psychologist, a person in a PTP who does not participate fully in the program and follow the individualized treatment plan may be re-hospitalized. Based on clinical findings, the applicant must determine that as a result of failure to participate fully or to follow the individualized treatment plan, the person's mental health has deteriorated so that hospitalization is in the person's best interest and the person poses a Likelihood of Serious Harm. The applicant must complete a certificate (form MH-100-PTP) stating that the person requires hospitalization and stating the grounds for that belief.

If the person in the PTP agrees to voluntary hospitalization after the certificate has been signed, and if the applicant believes that voluntary hospitalization is available and appropriate, the applicant can decide not to present the form MH-100-PTP to a judicial officer for signature.

(2) If the judicial officer reviewing MH-100-PHP authorizes re-hospitalization, the person in the PTP may be re-hospitalized on an emergency involuntary basis.

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Once the person is re-admitted to the state psychiatric hospital on an emergency involuntary basis from the PTP, the procedures described in sections D and E above apply, except that the application form filed with the court will be the Application to District Court for an Order of Commitment of Person in Progressive Treatment Program (MH-108-PTP Re-Hospitalization) and the blue paper will be the Application for Emergency Involuntary Admission of a Progressive Treatment Program Client to a Mental Hospital (MH-100-PTP).

(3) If the person has an advance directive or durable power of attorney or a guardian, the advance directive may be admitted into evidence at the re-hospitalization hearing, and the attorney in fact or guardian may provide testimony and evidence to the court. The court shall consider but is not required to follow any directions within the advance directive or durable power of attorney document or testimony from the attorney or guardian.

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## Forms

The following forms are included for informational purposes:

1) STATE OF MAINE  
APPLICATION TO DISTRICT COURT FOR AN ORDER OF COMMITMENT OF PERSON IN  
PROGRESSIVE TREATMENT PROGRAM- MH 108 PTP Nov 2006

2) ORDER OF ADMISSION TO PROGRESSIVE TREATMENT

3) STATE OF MAINE  
APPLICATION FOR EMERGENCY INVOLUNTARY ADMISSION OF A PROGRESSIVE  
TREATMENT PROGRAM CLIENT TO A MENTAL HOSPITAL-MH 100 PTP Nov 2006

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STATE OF MAINE  
APPLICATION TO DISTRICT COURT FOR AN ORDER OF ADMISSION TO THE  
PROGRESSIVE TREATMENT PROGRAM

TO THE DISTRICT COURT, District \_\_\_\_, Division of \_\_\_\_, County of \_\_\_\_ and State of  
Maine:

1. Application is made pursuant to 34-B M.R.S.A. § 3873 for a hearing to be held in accordance with 34-B M.R.S.A. § 3864 to determine whether \_\_\_\_\_ (the "patient"), who was admitted to \_\_\_\_\_ **Psychiatric Center** on \_\_\_\_\_, shall be ordered admitted to the progressive treatment program.
2. The basis for seeking an order admitting this patient to the progressive treatment program is as follows:
  1. The patient is 21 years old;
  2. The patient is currently involuntarily committed to this hospital;
  3. The patient suffers from a severe and persistent mental illness; and
  4. The patient has been clinically determined to need progressive treatment in order to prevent interruptions in treatment, relapse, and deterioration of mental health; and in order to survive safely in a community setting in the reasonably foreseeable future without posing a likelihood of serious harm.
3. The Applicant requests that the District Court:
  - A. Cause written notice of this application to be given to the patient, to whom notice may be delivered at \_\_\_\_\_ Psychiatric Center, \_\_\_\_\_, ME \_\_\_\_\_;
  - B. Cause written notice of this application to be given within two days to the patient's guardian, if any, and to one of the following: spouse, patient, adult, child, next of kin or friend. Applicant believes that notice to the guardian (if any) may be sent to \_\_\_\_\_ at \_\_\_\_\_ and that the appropriate other person to receive notice is \_\_\_\_\_, whose address is \_\_\_\_\_;
  - C. At least three days after this application is filed, appoint legal counsel for the patient, if the patient is not represented by counsel;
  - D. At least three days after this application is filed, cause the patient to be examined by two independent examiners, one of whom shall be chosen by the patient or his counsel, each examiner being either a licensed physician or a licensed clinical psychologist; and
  - E. Schedule a hearing to be held not later than fourteen days from the date of this application.

Date: \_\_\_\_\_

\_\_\_\_\_  
Chief Administrative Office, CAO's Designee  
Commissioner, or Commissioner's Designee  
(circle one)

\_\_\_\_\_ **Psychiatric Center**



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STATE OF MAINE

KENNEBEC, SS

Seventh District Court  
Division of Southern Kennebec  
Docket No. AUG-MH-\_\_\_\_\_

In re: \_\_\_\_\_

ORDER OF ADMISSION TO  
PROGRESSIVE TREATMENT  
PROGRAM

Notice having been duly and seasonably given according to law to the respondent and to other interested persons as ordered by the court, and a hearing having been had on the issues involved, at which hearing the respondent was represented by counsel or declined to be represented by counsel after full exploration of the respondent's right to counsel, and full consideration having been given to the evidence, including the reports of two examiners appointed by this court and to the record, the court finds by clear and convincing evidence that:

1. The respondent is 21 years old or older;
2. The respondent is currently involuntarily committed to Riverview Psychiatric Center;
3. The respondent suffers from a severe and persistent mental illness;
4. Based on the respondent's (i) current behavior; (ii) treatment history; and (iii) history of positive responses to treatment during hospitalization, relapse and deterioration of mental health following discharge, and inability to make informed decisions regarding treatment, the respondent is in need of progressive treatment in order to prevent interruptions in treatment, relapse, and deterioration of mental health, and in order to survive safely in a community setting in the reasonably foreseeable future without posing a likelihood of serious harm under 34-B M.R.S.A. § 3801(4)(D).
5. An assertive community treatment team is available to provide treatment and care for the respondent.

Now therefore it is ordered that:

1. \_\_\_\_\_ be admitted to the progressive treatment program and shall remain in the program for a period of 6 months, except that participation will terminate before the 6 month period is complete (i) if and when the assertive community treatment team psychologist or physician certifies that the respondent no longer needs progressive treatment program services or (ii) upon involuntary re-hospitalization by court order of the respondent;
2. In the event that the respondent fails to participate fully in the Progressive Treatment Program and the respondent's mental health deteriorates such that hospitalization is in the respondent's best interest and the respondent poses a likelihood of serious harm as defined in 34-B M.R.S.A. § 3801(4)(D), the respondent must return to Riverview Psychiatric Center pursuant to 34-B M.R.S.A. § 3873(5).

Date: \_\_\_\_\_

\_\_\_\_\_

January 2007

Judge, Maine District Court

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**STATE OF MAINE**  
**APPLICATION FOR EMERGENCY INVOLUNTARY ADMISSION OF A PROGRESSIVE**  
**TREATMENT PROGRAM CLIENT TO A MENTAL HOSPITAL**

**1. Application and Certification.**

I am a licensed \_\_\_\_\_ and a member of the Assertive Community Treatment team  
M.D./D.O./Ph.D.  
that provides court-ordered progressive treatment services to \_\_\_\_\_.  
Proposed patient

I examined the proposed patient on \_\_\_\_\_.  
Date

I hereby certify that the proposed patient does not fully participate in the Progressive Treatment Program and follow the individualized treatment plan, and that, as a result, the proposed patient's mental health has deteriorated so that hospitalization is in his or her best interest.

I further certify that the proposed patient poses a likelihood of serious harm as defined in 34-B M.R.S.A. § 3801(4)(D) (see reverse) based on the following clinical findings:

\_\_\_\_\_

\_\_\_\_\_

Basis for the determination that the proposed patient requires hospitalization, including foreseen risk of harm

I believe that \_\_\_\_\_ is the least restrictive form of transportation that meets  
Ambulance or other (please specify)  
the proposed patient's clinical needs.

I hereby apply under 34-B M.R.S.A. § 3863 (8) for emergency admission of the proposed patient to \_\_\_\_\_ Psychiatric Center.  
Riverview/Dorothea Dix

\_\_\_\_\_

Date	Printed name	Signature
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Name and address of proposed patient's guardian, spouse, parent, adult child, next of kin, or friend:

\_\_\_\_\_

**2. Judicial Review and Endorsement.**

Upon review pursuant to 34-B M.R.S.A. § 3863 and § 3873, I find this application and certificate to be regular and in accordance with the law, and that re-hospitalization is in the person's best interest, and that the person poses a likelihood of serious harm. I hereby authorize \_\_\_\_\_ to take \_\_\_\_\_  
Person authorized to take proposed patient into custody Proposed patient

into custody and transport him or her to \_\_\_\_\_ Psychiatric Center.  
Riverview/Dorothea Dix

Date	Judicial officer's printed name	Judicial officer's signature	Judicial officer's capacity (District, Probate or Superior Court Judge or Justice; Justice of the Peace)
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## INSTRUCTIONS

### General

- A. The application expires 3 days after the patient's admission to the hospital, except that if the third day is a weekend or holiday, the application expires on the next business day following the weekend or holiday.
- B. Before this application is presented for judicial signature, the proposed patient should be given the option to agree to voluntary hospitalization.
- C. The application cannot be altered after it has been judicially endorsed.

### Section 1

- A. The certifying examination must take place no more than two days before the person is admitted to the hospital.
- B. "Likelihood of serious harm" for the purposes of the Progressive Treatment Program is defined in 34-B M.R.S.A. § 3801(4)(D) to mean:

*In view of the person's treatment history, current behavior and inability to make an informed decision, a reasonable likelihood that deterioration of the person's mental health will occur and that the person will in the foreseeable future pose:*

- 1. A substantial risk of physical harm to the person as manifested by evidence of recent threats of, or attempts at, suicide or serious bodily harm;*
- 2. A substantial risk of physical harm to other persons as manifested by recent evidence of homicidal or other violent behavior or recent evidence that others are placed in reasonable fear of violent behavior and serious physical harm to themselves; or*
- 3. A substantial risk of severe physical or mental impairment or injury to the person as manifested by recent evidence of actions or behavior that demonstrates the person's inability to avoid or protect the person from such impairment or injury.*

In specifying grounds for the application, the applicant should include identification of the risk of harm that is being considered.

- C. The applicant should provide name and address of the proposed patient's guardian, spouse, parent, adult, next of kin, or (if none of those exists) friend so that the hospital can fulfill its obligation to notify that person.

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Section 2

The applicant must fill in the name of the transporter and the destination Psychiatric Center before seeking judicial endorsement.

Form MH-100-PTP Nov 2006